TRADEMAN

PTO/S8/09 (12-97)
Approved for use through 9/30/00, OMB 0651-0031

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Sunder the Paperwork Reduction Act of 1895, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## STATEMENT CLAIMING SMALL ENTITY STATUS (37 CFR 1.9(f) & 1.27(b))-INDEPENDENT INVENTOR

**Docket Number (Optional) JJK-2** 

Applicant, Patentee, or Identifier: UA	AMES J. KAUZLA	RICH	
Application or Patent No.:			
Filed or issued: 08/06/20	001	·····	
Title: METHOD FOR DESIGNI	NG A PROFILE	DIE FOR POLY	MER EXTRUSION
As a below named inventor, I hereby for purposes of paying reduced fees t			
the specification filed herewith	with title as listed abo	ove.	
the application identified above	e,		
the patent identified above.			•
I have not assigned, granted, convey grant, convey, or license, any rights in under 37 CFR 1.9(c) if that person habusiness concern under 37 CFR 1.9(c)	the invention to any per ad made the invention,	rson who would not or to any concern v	qualify as an independent inventor which would not qualify as a small
Each person, concern, or organization obligation under contract or law to as	on to which I have assig sign, grant, convey, or	gned, granted, conv license any rights	/eyed, or licensed or am under an in the invention is listed below:
No such person, concern, or	organization exists.		
Each such person, concern,	or organization is liste	d below.	
Separate statements are required from stating their status as small entities.		concern, or organiz	ation having rights to the invention
I acknowledge the duty to file, in this a entitlement to small entity status pric maintenance fee due after the date of	or to paying, or at the	time of paying, the	e earliest of the issue fee or any
JAMES J. KAUZLARICH NAMEOFINVENTOR	VAME OF INVENTOR		NAME OF INVENTOR
James / Kauskar	ich		
Signature of inventor	Signature of inventor	· · · · · · · · · · · · · · · · · · ·	Signature of inventor
10/23/01			
Date C	Date		Date

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

COPY OF PAPERS **ORIGINALLY FILED** 

/	OIPE	100
o o	JAN 0 7 2002	Prince
(	TRADEMARY	<u> </u>

Please type a plus sign (+) inside this box 🗡 🕇

OR

PTO/SB/01 (12-97)
Approved for use through 9/30/00. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## **DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION** (37 CFR 1.63)

Declaration Submitted with Initial Filing

☑ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Nur	nber	JJK-2		
First Named Inventor		KAUZLARICH		
COMPL	ETE II	F KNOWN		
Application Number	09,922,250			
Filing Date	08	/06/2001		
Group Art Unit	2.	121		
Examiner Name				

As a below named inven	tor, I hereby declare that:				
My residence, post office	address, and citizenship are	as stated below next to my	name.		
				irst and joint inventor (if plural	
names are listed below) of	the subject matter which is	claimed and for which a pa	tent is sought or	the invention entitled:	
METHOD FOR D	ESIGNING A PRO	FILE DIE FOR	POLYMER	EXTRUSION	
the specification of which is attached hereto OR	(Titl	e of the Invention)			
	D/YYYY) <mark>08/06/20</mark> 0	1 as Unite	d States Applica	tion Number or PCT International	
Application Number 09	Application Number 09/922,250 and was amended on (MM/DD/YYYY) (if applicable).				
I hereby state that I have re amended by any amendme	viewed and understand the nt specifically referred to ab	contents of the above ident	lified specificatio	n, including the claims, as	
	isclose information which is		defined in 37 CF	R 1.56.	
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a fiting date before that of the application on which priority is claimed.					
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO	
[			片片	님 님	
				5 5	
Additional foreign applica	tion numbers are listed on a	supplemental priority data	sheet PTO/SB/0	2B attached hereto:	
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.					
Application Number(	s) Filing Date	(MM/DD/YYYY)			
60/223,773	08/08/20	00		nal provisional application	
•				rs are listed on a	
				mental priority data sheet B/02B attached hereto.	
			F10/0	DIVZD BUBLIEU HEIEIV.	

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

**COPY OF PAPERS ORIGINALLY FILED** 

Piease type a plus	sign (+) inside this box	-	+

PTO/SB/01 (12-97)

s sign (+) inside this box - + + Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMS control number.

## **DECLARATION** — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application. U.S. Parent Application or PCT Parent **Parent Patent Number Parent Filing Date** Number (MM/DD/YYYY) (if applicable) Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Pater and Trademark Office connected therewith: 

Customer Number Place Custome Number Ber Code OR Registered practitioner(s) name/registration number tisted below Registration Registration Name Name Number Number 22,350 GEORGE F. HELFRICH Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto Direct all correspondence to: **Customer Number** OR X Correspondence address below or Bar Code Label Name GEORGE F. HELFRICH 162 SHASTA DRIVE Address Address City NEWPORT NEWS. VA 23608 ZIP Country (757)988-1916 (757) 877–1916 Telephone I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that withtut false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. A petition has been filed for this unsigned inventor Name of Sole or First Inventor: Given Name (first and middle lif anvi) Family Name or Sumame KAUZLARICH **JAMES** J. inventor's Onte Signature CMARLOTTESVILL **VA** USA USA Residence: City Country 1603 INGLEWOOD DRIVE Post Office Address **Post Office Address** CRy CHARLOTTESVILLE VA 22901 USA Country

supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

Additional inventors are being named on the